| / 5 | 8 | | | | | | | PTC | D/SB/17 (01-06 |
|--------------|---|-----------------------|--|-------------|---|---------------------------------------|--|---------------------------------|----------------------------|
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| MAY | Pees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). | | | | respond to a collection of information unless it displays a valid OMB control number Complete if Known | | | | |
| THADEMAN | | | | | Application Number | | 10/075,783-Conf. #9162 | | |
| TRADENAR | FEE TRANSMITTAL | | | Filing Date | | February 14, 2002 | | | |
| ····· | | For FY 20 | 006 | | First Named Inv | ventor | Claude R. Ga | uthier | |
| | | | | | Examiner Name | | F. O. Ferris | | |
| | Applicant cla | ims small entity stat | us. See 37 CFR 1.27 | 7 | Art Unit | | 2128 | *** | |
| | TOTAL AMOUNT | OF PAYMENT | (\$) 180.00 | | Attorney Docket | No. | 03226/16300 | 1; P7058 | |
| | METHOD OF PA | YMENT (check | all that apply) | | | | | | |
| | Check X | Credit Card | Money Order | No | | (please ider | ntify): | | |
| | X Deposit Accoun | nt Deposit Account I | Number: <u>50-0591</u> | eposit Ac | count Name: | | Osha · Liang | LLP | |
| | For the abo | ve-identified depo | sit account, the Di | irector is | hereby authorize | ed to: (che | ck all that apply |) | |
| | Charg | e fee(s) indicated | i below | | Charg | je fee(s) in | dicated below, e | except for th | e filing fee |
| • | Charo | e anv additional f | ee(s) or underpayi | ment of | Crodi | any overp | aymonto | | |
| | | under 37 CFR 1 | | | X Cledit | arry overp | ayments | | |
| | FEE CALCULAT | ION (All the fe | es below are du | ne nbo | n filing or may | be subj | ect to a surch | arge.) | |
| | 1. BASIC FILING, S | • | | ES | | | | | |
| | | FII | ING FEES | SE | ARCH FEES | EXAMII | NATION FEES | 3 | |
| | Application Type | Fee (\$ | Small Entity Fee (\$) | Fee (\$ | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fees P | aid (\$) |
| | Utility | 300 | 150 | 500 | 250 | 200 | 100 | | |
| | Design | 200 | 100 | 100 | 50 | 130 | 65 | | |
| | Plant | 200 | 100 | 300 | 150 | 160 | 80 | | |
| | Reissue | 300 | 150 | 500 | 250 | 600 | 300 | | |
| | Provisional | 200 | 100 | 0 | 0 | 0 | 0 | | |
| | 2. EXCESS CLAIM | FEES | | | | | | . 5 | Small Entity |
| | Fee Description | | | | | | | Fee (\$) | Fee (\$) |
| | Each claim over 20 | - | • | | | | | 50 | 25 |
| | Each independent c | | iding Reissues) | | | | | 200 | 100 |
| | Multiple dependent | claims | | | | | | 360 | 180 |
| | Total Claims | Extra Claims | Fee (\$) | Fee F | Paid (\$) | <u>M</u> | ultiple Depend | | |
| | - = | X | ; = _ | | | E | e (\$) | Fee Paid (\$) | |
| | HP = highest numer of | | • | F I | haid (#) | | | | - |
| | Indep. Claims | Extra Claims | Fee (\$) = | ree | Paid (\$) | | | | |
| | HP = highest numer of | | | 3. | | | | | _ |
| | 3. APPLICATION S | | | | | | | | |
| | If the specification | | | | | | | | |
| | | | he application size 5 U.S.C. 41(a)(1)(| | | or small e | ntity) for each a | aditional 50 | |
| | Total Sheets | Extra Sheets | | . , | dditional 50 or frac | ction there | of Fee (\$) | Fee P | aid (\$) |
| | | 00 = | | | (round up to a who | | | = | |
| | 4. OTHER FEE(S) | | | | , | · · · · · · · · · · · · · · · · · · · | | Fees F | Paid (\$) |
| ļ | Non-English Spe | ecification, \$130 | fee (no small ent | ity disc | ount) | | | | |
| | Other (e.g., late | filing surcharge): | 1806 Submission | on of a | n Information D | isclosure | Statement | 180 | 0.00 |
| [| SUBMITTED BY | 4 | | | | | | | |
| | Signature | 6 | | | Registration No. (Attorney/Agent) | 45,079 | Telephone | (713) 228 | -8600 |

| SUBMITTED BY | | | | |
|-------------------------------------|-----------------------------------|--------|-----------|----------------|
| Signature | Registration No. (Attorney/Agent) | 45,079 | Telephone | (713) 228-8600 |
| Name (Print/Type) Thomas K. Scherer | | | Date | May 2, 2006 |

PTO/SB/96 (12-05)
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STATEMENT UNDER 37 CFR 3.73(b)

| Applicant/Patent Own | er: Claude R Gauthier Bris | ın W. Amick, Dean Liu, and | Pradeen R. Trivedi | | | |
|--|---|---|--|--|--|--|
| Applicative atent Own | er. Claude R. Gautilier, bila | iii vv. Aillick, Deall Liu, allo | Fradeep K. Tilvedi | | | |
| Application No./Paten No./Control No.: | t 10/075,783 | Filed/Issue Date: | February 14, 2002 | | | |
| Entitled: METHOD FOR OPTIMIZING DECOUPLING CAPACITOR DESIGN IN DELAY LOCKED LOOPS | | | | | | |
| Sun Mic (Name of Assignee) | rosystems, Inc. , a | Co | orporation partnership, university, government agency, etc.) | | | |
| | | (Type of Assignee, e.g., corporation, p | partiership, university, government agency, etc.) | | | |
| states that it is: | | | | | | |
| 1. the assigne | ee of the entire right, title, and in | nterest; or | | | | |
| 2. x an assigne | e of less than the entire right, ti | tle and interest. | | | | |
| (The extent | (by percentage) of its ownersh | ip interest is 100 % | (o) | | | |
| in the patent application | on/patent identified above by vir | rtue of either: | | | | |
| was recorded Frame | ont from the inventor(s) of the part in the United States Patent an 0191 , or a true copy of the from the inventor(s), of the part follows: | d Trademark Office at Ree f the original assignment is | i 012599 , attached. | | | |
| 1. From: | onows. | To: | | | | |
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| | cument was recorded in the Uni | | lemark Office at | | | |
| | , Frame | | | | | |
| 3. From: | | To: | | | | |
| <u> </u> | cument was recorded in the Uni | | lemark Office at | | | |
| Reel | , Frame | , or for which a co | ppy thereof is attached. | | | |
| Additiona | I documents in the chain of title | are listed on a supplement | tal sheet. | | | |
| As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11. [NOTE: A separate copy (<i>i.e.</i> , a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08] | | | | | | |
| The undersigned (who | ose tit <u>le is supplied below)</u> is au | thorized to act on behalf of | the assignee. | | | |
| <u> </u> | #45. | 079 | 5/2/2006 | | | |
| | Signature | | Date | | | |
| | Thomas K. Scherer | | 713-228-8600 | | | |
| | Printed or Typed Name | | Telephone Number | | | |
| Aut | norized Signer for Assignee Title | | | | | |
| Express Mail, Airbill No. EV | per (along with any paper referred to as /809547405US, on the date shown belo P.O. Box 1450, Alexandria, VA 22313- | w in an envelope addressed to: | g deposited with the U.S. Postal Service as | | | |
| Dated: May 2, 2006 | _ | Me Fallen Henda C. | McFadden) | | | |



Application No. (if known): 10/075,783

Attorney Docket No.: 03226/163001; P7058

Certificate of Express Mailing Under 37 CFR 1.10

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| Signature | 9 | | | |
| Brenda C. McFadden | | | | |
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IDS (Citation) by Applicant (2 References) (1 page)

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